| Case 16-04212 Doc 1 Fill in this information to identify your case: | Filed 02/11/16 | Entered 02/11/16 11:23:07 age 1 of 67 | Desc Main |
|---|---|--|------------------------------------|
| United States Bankruptcy Court for the: | | | |
| Northern District of: Illinois (State) | | | |
| Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pá | art 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Shanita | |
| | | First name | First name |
| | Write the name that is on your government-issued | | |
| | picture identification (for | Middle name | Middle name |
| | example, your driver's license or passport | Floyd Last name | Last name |
| | | Last name | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2 | All other names you | | |
| ۷. | have used in the last | First name | First name |
| | 8 years | | |
| | Include your married or | Middle name | Middle name |
| | maiden names. | | |
| | | Last name | Last name |
| | | First name | First name |
| | | | |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits | XXX - XX- <u>5251</u> | xxx - xx- |
| | of your Social Security number or | OR | OR |
| | federal Individual | 9 xx - xx- | 9 xx - xx- |
| | Taxpayer | | |
| | Identification number (ITIN) | | |
| | Hamber (ITHV) | | |

Shanita Case 16-04212 Doc 1 Filed 02#16/1/16 Entered @24411466/144423:07 Desc Main Debtor 1 Page 2 of 67 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names ✓ I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names 5. Where you live If Debtor 2 lives at a different address: 8908 S Union Ave Number Street Number Street Chicago Illinois 60620 State City Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City State Zip Code City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived Over the last 180 days before filing this petition, I have lived district to file for in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

| 7. The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | | | | | | |
|---|---|--------------------------------|--------------------------------|--|--|--|--|--|--|
| 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in court for more details about how you may pay. Typically, if you are paying the fee yours pay with cash, cashier's check, or money order If your attorney is submitting your pay behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Ap Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for C law, a judge may, but is not required to, waive your fee, and may do so only if your incomposed installments). If you choose this option, you must fill out the Application to Have the Chapter Waived (Official Form 103B) and file it with your petition. | | | | | | | | | |
| 9. Have you filed for bankruptcy within the last 8 years? | V No. Yes. District District District | When When When | MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number | | | | | |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | District Debtor District | When _ | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known | | | | | |
| 11. Do you rent your residence? | ✓ No. Go to line 12. ☐ Yes. Has your landlord obtained ☐ No. Go to line 12. ☐ Yes. Fill out <i>Initial Stat</i> this bankruptcy p | tement About an Eviction Judgm | · | | | | | | |

Shanita Case 16-04212 Doc 1 Filed 02#16/1/16 Entered 02/41/1/16 /14/14/23:07 Desc Main Debtor 1 Page 4 of 67 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? City State Zip Code

t Name Middle Name

Document Document

Page 5 of 67

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling. The law requires tha

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of bankruptcy petition, and I received a certificate of completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. that you developed with the agency. I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of bankruptcy petition, but I do not have a certificate of completion. completion. Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment plan, if any. plan, if any. I certify that I asked for credit counseling services from I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those an approved agency, but was unable to obtain those services during the 7 days after I made my request, and services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver exigent circumstances merit a 30-day temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required filed for bankruptcy, and what exigent circumstances required you to file this case. you to file this case. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your payment plan you developed, if any. If you do not do so, your case may be dismissed. case may be dismissed. Any extension of the 30-day deadline is granted only for cause Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. and is limited to a maximum of 15 days. I am not required to receive a briefing about credit

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

I have a mental illness or a mental

deficiency that makes me incapable of

do so.

counseling because of:

Incapacity.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Doc 1 Filed 02/14/1/16 Entered 02/14/14/16 (14-14-12)3:07 Desc Main Page 6 of 67 Document of the Document of th **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Shanita Floyd Signature of Debtor 2 Signature of Debtor 1 Executed on <u>2/11/2016</u> Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1

Debtor 1 Shanita Case 16-04212 Doc 1 Filed 02/14/16 Entered 02/14/14/16 @20/24/14/16 Doc Main

| Shanita Case 16-04212 Doc 1 Filed 02/14/16 Entered 02/14/14/16 @20/24/14/14/16 Page 7 of 67

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

X

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| rrect. | | | | |
|--|--------|------|-----------------------------|--|
| /s/ Daniel Giannola Signature of Attorney for Debtor | | Date | 2/11/2016 MM / DD / YYYY | <u>, </u> |
| Daniel Giannola | | | | |
| Printed name | | | | |
| Semrad Law Firm | | | | |
| Firm name | | | | |
| Number | Street | | | |
| City | Stat | e | Z | Zip Code |
| Contact phone | | | Email address | _ |
| Bar number | | | State | |

Doc 1 Filed 02/11/16 Fntered 02/11/16 11:23:07 Desc Main Fill in this information to identify your case: Debtor 1 Shanita Floyd First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$18,155.00 1b. Copy line 62, Total personal property, from Schedule A/B \$18,155.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$23,426.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$1,200.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$16.534.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F...... \$41,160.00 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$3,076.91 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$2,426.00

Debtor 1 ShanitaCase 16-04212 Doc 1 Filed 02/14/16 Entered 02/14/14/16 @23:07 Desc Main

First Name Document Page 9 of 67

| Pa | Part 4: Answer These Questions for Administrative and Statistical Records | | | | | | | | | |
|--|--|--------------------------|--------|--|--|--|--|--|--|--|
| 6. 4 | Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | | | | | | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | | |
| | Yes. | | | | | | | | | |
| 7. \ | 7. What kind of debt do you have? | | | | | | | | | |
| | Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. | | | | | | | | | |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. C this form to the court with your other schedules. | heck this box and submit | | | | | | | | |
| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from C Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | Official | \$0.00 | | | | | | | |
| 9. | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | | | | | | | | | |
| | From Part 4 on Schedule E/F, copy the following: | Total claim | | | | | | | | |
| | 9a. Domestic support obligations (Copy line 6a.) | \$0.00 | | | | | | | | |
| | 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$1,200.00 | | | | | | | | |
| | 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 | | | | | | | | |
| | 9d. Student loans. (Copy line 6f.) | \$11,257.00 | | | | | | | | |
| | 9e. Obligations arising out of a separation agreement or divorce that you did not report as | \$0.00 | | | | | | | | |
| priority claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) \$0.00 | | | | | | | | | | |
| | 9g. Total. Add lines 9a through 9f. | \$12,457.00 | | | | | | | | |

| Fill in this | information to identify your case | | FIIEU UZI III | n Flieren (127), | 1/10 11.23.07 | Desc Main | | |
|---|--|--|--|--|---|---|--|--|
| Debtor 1 | Shanita | | FI | loyd | | | | |
| | First Name | Middle N | Name La | ast Name | | | | |
| Debtor 2 (Spouse, | if filing) First Name | Middle N | Name La | ast Name | | | | |
| United St | ates Bankruptcy Court for the: | Northern | District | of Illinois (State) | | | | |
| Case nun (If known) | | | | | | | | |
| Officia | al Form 106A/B | | | | | Check if this is an amended filing | | |
| Sche | dule A/B: Prope | ertv | | | | 12 | | |
| category v esponsib vrite your Part 1: | ategory, separately list and des where you think it fits best. Be ble for supplying correct infor r name and case number (if kn Describe Each Residen u own or have any legal or eq | e as complete and mation. If more sp own). Answer eve ce, Building, L | accurate as possik pace is needed, atta ry question. and, or Other F | ole. If two married people ach a separate sheet to the Real Estate You Own | are filing together, both is form. On the top of a or Have an Interes | n are equally any additional pages, | | |
| ✓ | No. Go to Part 2 | | | | | | | |
| 1.1 | Yes. Where is the property? Street address, if available, or | other description | What is the proposition of the p | | the amount of ar Creditors Who I | ecured claims or exemptions. Put ny secured claims on <i>Schedule D:</i> Have Claims Secured by Property. | | |
| | | | Condominium of Manufactured of | or cooperative or mobile home | Current value entire property | | | |
| | Number Street City State | Zip Code | Land Investment prop Timeshare Other | perty | interest (such a | ature of your ownership as fee simple, tenancy by or a life estate), if known. | | |
| | | | Debtor 1 only Debtor 2 only Debtor 1 and D At least one of | the debtors and another you wish to add about the | (see instru | · | | |
| If you | own or have more than one, list h | nere: | NA/le at in the surrous | anto 2 Charle all that are all | De west de divet e | and deima an arranting D. t | | |
| 1.2 | Street address, if available, or | other description | Single-family h | | the amount of ar | ecured claims or exemptions. Put ny secured claims on <i>Schedule D:</i> Have Claims Secured by Property. | | |
| | | | | or cooperative or mobile home | Current value entire property | | | |
| | Number Street City State | Zip Code | Land Investment prop Timeshare Other | perty | interest (such a | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. | | |
| | | | Debtor 1 only Debtor 2 only Debtor 1 and D At least one of | the debtors and another you wish to add about the | (see instru | · | | |

| Debtor 1 | ShanitaCase 16-042 First Name | 12 Doc 1 I | <u>Filed 02/16/1/16 Entered 02/11/16</u> Docume nt Page 11 of 67 | (i1kabwa23: <u>07 Des</u> | sc Main |
|------------|--|------------------------------|---|---------------------------|---|
| 1.3 | et address, if available, or oth | | hat is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property | the amount of any secure | |
| City | State | Zip Code | Timeshare Other | the entireties, or a life | |
| | | w C C | ho has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Check if this is co | mmunity property |
| | | pro ion you own for all o | her information you wish to add about this item, soperty identification number: of your entries from Part 1, including any entries for the source. | or pages | |
| Part 2: | Describe Your Vehicle | es | | <u> </u> | |
| ou own tha | at someone else drives. If you ns, trucks, tractors, sport utilit | lease a vehicle, also re | any vehicles, whether they are registered or not? In eport it on Schedule G: Executory Contracts and Unexpes | | |
| | Make Model: Year: Approximate mileage: Other information: 2014 Chevy Cruze | <u>Chevrolet</u> | Who has an interest in the property? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | the amount of any secur | claims or exemptions. Put ed claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$17225.00 |
| | | | Check if this is community property (see instructions) | | |
| 3.2 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | the amount of any secur | claims or exemptions. Put ed claims on Schedule D: eaims Secured by Property. Current value of the portion you own? |
| | | | At least one of the debtors and another Check if this is community property (see instructions) | | · · · |

| Debtor 1 | | Filed 02/11/1/16 Entered 02/11/11/1 | oi/alkabwa23: <u>07 Des</u> | c Main | |
|----------|---|--|--|---|--|
| | First Name Middle Name | Document™ Page 12 of 67 | | | |
| 3.3 | Make | Who has an interest in the property? Check | | laims or exemptions. Put | |
| | Model: | one. | • | ed claims on Schedule D: | |
| | Year: | Debtor 1 only | Creditors Who Have Claims Secured by Property. | | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see | | | |
| | | instructions) | | | |
| 3.4 | Make | Who has an interest in the property? Check | Do not deduct secured of | laims or exemptions. Put | |
| | Model: | one. | the amount of any secured claims on Schedule D: | | |
| | Year: | Debtor 1 only | Creditors Who Have Cla | aims Secured by Property. | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see | | | |
| | | instructions) | | | |
| └ | Yes Make | Who has an interest in the property? Check | Do not deduct secured of | laims or exemptions. Put | |
| | Model: | one. | the amount of any secured claims on Schedule D: | | |
| | Year: | Debtor 1 only | Creditors Who Have Cla | aims Secured by Property. | |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | At least one of the debtors and another | · | | |
| | | Check if this is community property (see | | | |
| | | instructions) | | | |
| 4.2 | | iristructions) | | | |
| | Make | Who has an interest in the property? Check | Do not deduct secured o | laims or exemptions. Put | |
| | Make Model: | , | the amount of any secure | ed claims on <i>Schedule D:</i> | |
| | Model: Year: | Who has an interest in the property? Check | the amount of any secure | • | |
| | Model: | Who has an interest in the property? Check one. | the amount of any secure Creditors Who Have Cla | ed claims on Schedule D: aims Secured by Property. | |
| | Model: Year: | Who has an interest in the property? Check one. Debtor 1 only | the amount of any secure | ed claims on <i>Schedule D:</i> | |
| | Model: Year: Approximate mileage: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | the amount of any secure Creditors Who Have Cla Current value of the | ed claims on Schedule D: aims Secured by Property. Current value of the | |
| | Model: Year: Approximate mileage: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | the amount of any secure Creditors Who Have Cla Current value of the | ed claims on Schedule D: aims Secured by Property. Current value of the | |
| 5. Add | Model: Year: Approximate mileage: Other information: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | the amount of any secure Creditors Who Have Ck Current value of the entire property? | ed claims on Schedule D: aims Secured by Property. Current value of the | |

Debtor 1 ShanitaCase 16-04212 First Name Doc 1 Filed 02/14/16 Entered 02/14/16/14/23:07 Desc Main Document Page 13 of 67

Describe Your Personal and Household Items

| | Oo you own or ha | ave any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|-------------------------|--|---|--|
| | 6. Household goods | and furnishings | |
| | Examples: Major appl | liances, furniture, linens, china, kitchenware | |
| | No | | |
| $\overline{\mathbf{V}}$ | Yes. Describe | Used Furniture | \$400.00 |
| | | | · |
| | • | s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music s; electronic devices including cell phones, cameras, media players, games | |
| ⊻ | ' No | | |
| | Yes. Describe | | - <u></u> - |
| | 8. Collectibles of value | lie . | |
| | Examples: Antiques a stamp, coi | and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; in, or baseball card collections; other collections, memorabilia, collectibles | |
| ¥ | | | |
| L | Yes. Describe | | |
| | | orts and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes s; carpentry tools; musical instruments | |
| $\overline{\mathbf{V}}$ | N o | | |
| Е | Yes. Describe | | |
| | 10. Firearms | | |
| V | Examples: Pistols, rifle | es, shotguns, ammunition, and related equipment | |
| Ē | Yes. Describe | | |
| | 11. Clothes Examples: Everyday o | clothes, furs, leather coats, designer wear, shoes, accessories | |
| $\overline{\mathbf{r}}$ | Yes. Describe | Used Clothing | \$350.00 |
| | 12. Jewelry Examples: Everyday je gold, silve | ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | |
| | No | | |
| $\overline{\mathbf{Q}}$ | Yes. Describe | Misc Costume Jewelry | \$75.00 |
| | 13. Non-farm animals Examples: Dogs, cats | | |
| ¥ | | | |
| L | Yes. Describe | | |
| | 14. Any other person | al and household items you did not already list, including any health aids you did not list | |
| V | ' No | | |
| Е | Yes. Describe | | |
| | 15. Add the dollar val | lue of all of your entries from Part 3, including any entries for pages you have attached | 0005.00 |
| | | number here | \$825.00 |

Shanita Case 16-04212 Doc 1 Filed 02/16/16 Entered 02/16/16/16/16/23:07 Desc Main Debtor 1 Document Page 14 of 67 **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes 17.1. Checking account: Bank of America \$5.00 17.2. Checking account: 17.3. Savings account: United Credit Union \$100.00 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes

% of ownership:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in

an LLC, partnership, and joint venture

Yes. Give specific information about

Name of entity

✓ No

them

| Deb | tor 1 ShanitaCase It | | | <u> 1terea (</u> 023/elnlu/hibeo <i>(it</i> kabiva)3: <u>07</u> | Desc Main |
|-----|--|--|--|---|-----------|
| | First Name | Middle Name | | ge 15 of 67 | |
| 20. | | | gotiable and non-negotiable | | |
| | | | niers' checks, promissory notes, asfer to someone by signing or d | | |
| | No | and the second s | 2, 12 12g of G | | |
| | Yes. Give specific | | | | |
| | information about | Issuer name: | | | |
| | them | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 21. | | | 73(h) thrift savings accounts or | other pension or profit-sharing plans | |
| | No No | .A, LINIOA, Neogii, 40 I(K), 40 | JO(D), tillit saviligs accounts, or | other pension or promesnaming plans | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account separately. | 401(k) or similar plan: | | | |
| | | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | - | - | | |
| | | Additional account: | | | |
| 00 | Coought done its and | Additional account: | | | |
| 22. | Security deposits and property of all unused | | at you may continue service or u | se from a company | |
| | Examples: Agreements v | | public utilities (electric, gas, water | | |
| | companies, or others | | | | |
| | ✓ No | | Institution name: | | |
| | Yes | Electric: | moutution name. | | |
| | | | | | |
| | | Gas: | - | | |
| | | Heating oil: | | | |
| | | Security deposit on rental u | nit: | | |
| | | Prepaid rent: | | | _ |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | <u> </u> |
| | | Other: | | | |
| 23. | Annuities (A contract for | a periodic payment of mone | y to you, either for life or for a nu | mber of years) | _, |
| | ✓ No | | | | |
| | Yes | Issuer name and description | n: | | |
| | | | | | |
| | | | | | |
| | | | | | |

| Debt | or 1 | Shanita First Name | ase 1 | 6-04212 | Doc 1 | | <u>02/1√1/16</u> :umetht ^{me} | | | 6 (ilkalvi23: <u>07</u> | Desc Main |
|------|-------|-------------------------------|-----------------|---|-----------------|--------------|---|------------------|------------------|-------------------------|---|
| 24. | | | | tion IRA, in a , 529A(b), and | | a qualified | d ABLE progra | m, or under a | qualified sta | te tuition program. | |
| | | No Yes | Institutio | on name and d | escription. Sep | arately file | the records of a | ny interests.11 | U.S.C. § 521(| c): | |
| 25. | | sts, equita rcisable fo | | | ts in property | (other tha | an anything lis | ted in line 1), | and rights or | powers | |
| | | Yes. Desc | ribe | | | | | | | | |
| 26. | Еха | | net dom | | | | intellectual pro yalties and licens | | nts | | |
| 27. | | | ding per | , and other ge mits, exclusive | | | ssociation holdir | gs, liquor licer | nses, professio | nal licenses | |
| Mor | ney (| or prope | rty ow | red to you? | ? | | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax | refunds ov | ved to y | ou | | | | | | | |
| | | Yes. Give s about you a | them, in | nformation acluding whethe ed the returns ars | er | | | | | Federal: State: Local: | |
| 29. | | nily suppor nples: Past | | ump sum alimo | ny, spousal sup | pport, child | support, mainte | nance, divorce | settlement, pro | operty settlement | |
| | | | ::: :-:: | nformation | | | | | | Alimony: | |
| | | res. Give s | pecilic ii | normation | | | | | | Maintenance: | |
| | | | | | | | | | | Support: | |
| | | | | | | | | | | Divorce settlement | : |
| | | | | | | | | | | Property settlemen | t: |
| | | <i>nples:</i> Unpa | aid wage | one owes you es, disability ins ity benefits; unp | urance payme | | ity benefits, sick omeone else | pay, vacation p | oay, workers' co | mpensation, | |
| | | No Yes. Descr | be | | | | | | | | |
| | | | | | | | | | | | |

| Debt | tor 1 | ShanitaCase 16 First Name | 6-04212 | Doc 1 Middle Name | | <u>02∮&√1/16</u> um'e⊓t™e | Entere Page 1 | | 1.6 (1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1. | Des | c Main |
|------|----------------|---|-------------------|----------------------|---------------|----------------------------------|------------------|-------------------|--|------------------|---|
| 31. | | rests in insurance mples: Health, disabi | | ance; health | | | Ū | | r's insurance | | |
| | | No Yes. Name the insura of each policy and lis | , , | | Company nar | me: | | | Beneficiary: | | Surrender or refund value: |
| 32. | If you | interest in property u are the beneficiary erty because someon No Yes. Describe | of a living trust | | | | policy, or are | currently entitle | d to receive | | |
| 33. | Exar | ms against third pa mples: Accidents, em No | | | | | ade a dema | nd for paymer | nt | | |
| | _ | Yes. Describe | | | | | | | | _ | |
| 34. | to s | er contingent and one off claims No Yes. Describe | unliquidated | claims of ev | ery nature, | including co | unterclaims | of the debtor | and rights | | |
| 35. | _ | financial assets yo | u did not alrea | ady list | | | | | | | |
| | | Yes. Describe | | | | | | | | _ | |
| 36. | | the dollar value of Part 4. Write that nu | | | | | | | | | \$105.00 |
| Part | 5: | Describe Any B | usiness-Re | elated Pro | perty You | Own or H | ave an Int | erest In. Lis | st any real estate | e in P | art 1. |
| 37. | Do y | ou own or have an | y legal or equ | itable intere | est in any bu | siness-relate | d property? | | | | |
| | | No. Go to Part 6. Yes. Go to line 38. | | | | | | | | por Do | rrent value of the rtion you own? not deduct secured claims exemptions |
| 38. | ✓ | ounts receivable or No Yes. Describe | commissions | s you alread | y earned | | | | | | |
| 39. | Office Exar | ce equipment, furn | | | odems, printe | ers, copiers, fa | x machines, | rugs, telephone | es, desks, chairs, elect | ronic de | evices |
| | | Yes. Describe | | | | | | | | | |

| Deb | tor 1 ShanitaCase 10 | <u>6-04212 D0C 1</u> | Filed 02fbyb/16 | Entered (#Zz/elnlu/hbe) (#Jk | ndown23: <u>07 De</u> | esc Main |
|-------|---|--|--|---------------------------------|-----------------------|---|
| 40. | First Name Machinery, fixtures, eq | Middle Name uipment, supplies you u | Documether I se in business, and tools of | Page 18 of 67 your trade | | |
| | ✓ No | | | | | |
| | Yes. Describe | | | | | |
| 41. | Inventory | | | | | |
| | ✓ No | | | | | |
| | Yes. Describe | | | | | |
| 42. | Interests in partnershi | ips or joint ventures | | | | |
| | ✓ No | | Name of antitu | 0/ a4 | f our or object | |
| | Yes. Give specific information about them | | Name of entity: | 76 UI | f ownership: | |
| | | | | | | |
| 43. (| Customer lists, mailing | lists, or other compilation | ons | | | |
| | ✓ No | | | | | |
| | Yes. Do your lists in | clude personally identifiable | e information (as defined in 11 | U.S.C. § 101(41A))? | | |
| | ☐ No | | | | | |
| | Yes. Descr | ibe | | | | |
| 44. | Any business-related p | property you did not alrea | ady list | | | |
| | ✓ No | | | | | |
| | Yes. Give specific | | | | | <u> </u> |
| | information | | - | | | _ |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | dd the dollar value of a | - | art 5, including any entries f | or pages you have attached | > | |
| Part | | Farm- and Commerc | | operty You Own or Have | an Interest In. | |
| 46. | • | • | | rcial fishing-related property? | | |
| | ✓ No. Go to Part 7. | , .g: -q | | | | Current value of the |
| | Yes. Go to line 47. | | | | | portion you own? Do not deduct secured claims or exemptions |
| 47. | Farm animals Examples: Livestock, por | ultry, farm-raised fish | | | | |
| | ✓ No | | | | | |
| | Yes. Describe | | | | | |

| Deb | tor 1 | ShanitaCase 16 First Name | 6-04212 | Doc 1 Middle Name | Filed 02#14/1 Documen | | Entered 02s Page 19 of 6 | /alnlu/nlo6/akaliv223: <u>07</u> 7 | Desc | Main |
|--------------|----------|---|-----------------|----------------------|--------------------------|---------|--------------------------|---------------------------------------|-------------|--------------|
| 48. | Cro | ps-either growing | or harvested | | | • | . dige = c c. c | | | |
| | ✓ | No | | | | | | | | |
| | | Yes. Describe | | | | | | | _ | |
| 49. | Farı | m and fishing equip | oment, imple | ments, machi | nery, fixtures, and | d tool: | s of trade | | | |
| | ✓ | No | | | | | | | | |
| | | Yes. Describe | | | | | | | | |
| 50. | Farı | m and fishing supp | lies, chemica | als, and feed | | | | | | |
| | ✓ | No | | | | | | | | |
| | | Yes. Describe | | | | | | | _ | |
| 51. | | farm- and commer mples: Livestock, pou | | | ty you did not alre | eady li | st | | | |
| | ✓ | No | | | | | | | | |
| | | Yes. Describe | | | | | | | _ | |
| | | L | | | | | | | | |
| | | | - | | | | for pages you have | | | |
| | u | | | | | | | | | |
| | | | | | | | | | | |
| Part | 7: | Describe All Pro | perty You | Own or Ha | ve an Interest | in T | hat You Did Not | List Above | | |
| 53. | | ou have other prop | | | ot already list? | | | | | |
| | | mples: Season tickets | s, country club | membersnip | | | | | | |
| | | | | | | | | | | |
| | | Yes. Give specific information | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 54. A | dd th | e dollar value of all | of your entri | ies from Part | 7. Write that numl | ber he | re | | > | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Part | 8: | List the Totals of | of Each Pa | rt of this F | orm | | | | | |
| 55. F | Part 1 | : Total real estate. I | ine 2 | | | | | > | | <u></u> _ |
| | | | | | | | | | | |
| 56. p | oart 2 | total vehicles, line | 5 | | <u>\$1</u> | 17225.0 | 00 | | | |
| 57. P | art 3 | : Total personal and | d household | items, line 15 | <u>\$8</u> | 325.00 | | | | |
| 58. P | art 4 | : Total financial ass | ets, line 36 | | <u>\$1</u> | 105.00 | | | | |
| 59. F | Part 5 | : Total business-re | lated propert | ty, line 45 | | | | | | |
| 60. F | Part 6 | : Total farm- and fi | shing-related | d property, line | e 52 | | | | | |
| 61. F | Part 7 | : Total other prope | rty not listed | , line 54 | | | | | | |
| 62. 1 | Γotal | personal property. | Add lines 56 th | hrough 61 | | 18155.0 | 00 |] | | + \$18155.00 |
| | | | | | | | | Copy personal property to | otal ▶ | |
| 62 T | otal a | of all proporty on Se | chodulo A/P | Add line 55 + 1 | ino 62 | | | | | \$18155.00 |

| Fill i | in this inform | Case 16-04212 ation to identify your case: | Doc 1 Filed 02/ | 11/16 Entered 02/1 | 1/16 11:23:07 | Desc Main |
|--|---|--|--|---|--|---|
| | otor 1 | Shanita First Name | Middle Name | Floyd Last Name | | |
| | otor 2 ouse, if filing) | | Middle Name | Last Name | | |
| Unit | ted States Ba | nkruptcy Court for the: | Northern E | District of Illinois | | |
| | se number nown) | | | (State) | | |
| Of | ficial F | form 106C | | | 1 | Check if this is a amended filing |
| Sc | hedul | C: The Prop | erty You Claim | as Exempt | | 12/1 |
| For is to exer rece exer prop | each iten o state a s mpted up eive certa mption of perty is d t1: Ident Which set | n of property you classecific dollar amount to the amount of an in benefits, and tax-100% of fair market etermined to exceed the property You of exemptions are you ce claiming state and federal e claiming federal exemptions. | at as exempt. Alternatively applicable statutory exempt retirement function value under a law that that amount, your execution as Exempt laiming? Check one only, even nonbankruptcy exemptions. 11 U.S.C. § 522(b)(2) | st specify the amount of vely, you may claim the full limit. Some exemptionsds—may be unlimited in a limits the exemption to emption would be limited an if your spouse is filing with you. | ull fair market value —such as those fo dollar amount. How a particular dollar to the applicable s | r health aids, rights to wever, if you claim an amount and the value of the |
| | | ription of the property ar lle A/B that lists this prop | nd line Current value of perty the portion you own | Amount of the exemption yo | | cific laws that allow exemption |
| | | | Copy the value from Schedule A/B | | | |
| | Brief description | Used Clothing | \$350.00 | ▽ | | 735 ILCS 5/12-1001(a) |
| | Line from Schedule A | | <u> </u> | \$350.00 100% of fair market value, u applicable statutory limit | ip to any | |
| | Brief description | Used Furniture | \$400.00 | ✓ | | 735 ILCS 5/12-1001(b) |
| | Line from Schedule A | | <u> </u> | \$400.00 100% of fair market value, u applicable statutory limit | | |
| 3. | (Subject to | adjustment on 4/01/16 and | | 5? es filed on or after the date of adjus n 1,215 days before you filed this c | , | |

No Yes

Debtor 1 Shanita Case 16-04212 Doc 1 Filed 02/10/1/16 Entered 02/2/2011/166/161/23:07 Desc Main

First Name Middle Name Documer Name Page 21 of 67

Part 2: **Additional Page** Brief description of the property and line Current value of Amount of the exemption you claim Specific laws that allow exemption on Schedule A/B that lists this property the portion you Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$5.00 **V** description: **Bank of America** \$5.00 Line from 100% of fair market value, up to any Schedule A/B: 17 applicable statutory limit 735 ILCS 5/12-1001(b) Brief \$75.00 **V** Misc Costume Jewelry description: Line from 100% of fair market value, up to any Schedule A/B: 12 applicable statutory limit Brief 735 ILCS 5/12-1001(c) \$17,225.00 description: 2014 Chevy Cruze Line from 100% of fair market value, up to any Schedule A/B: 03 applicable statutory limit 735 ILCS 5/12-1001(b) Brief \$100.00 **✓** description: **United Credit Union** \$100.00 Line from 100% of fair market value, up to any

applicable statutory limit

Schedule A/B:

17

| | Case 16-04212 | Doc 1 Filed (| 02/11/16 Entered 02/1 | 1/16 11·23·07 | Desc Main | |
|--|--|---|--|--|---|------------------------------------|
| Fill in this inform | ation to identify your case: | | | 1/10 11.20.07 | Desc Main | |
| Debtor 1 | Shanita | | Floyd | | | |
| 202101 | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | ankruptcy Court for the: N | lorthern | District of Illinois | | | |
| | - · · · - | | (State) | | | |
| Case number (If known) | | | | | | |
| ` | orm 106D | | | | | neck if this is a nended filing |
| Schedu | le D: Credito | rs Who Hav | ve Claims Secure | d by Prope | rty | 12/1 |
| 1. Do any cre No. Ch | editors have claims secured | d by your property? form to the court with you | name and case number (if keeps or other schedules. You have nothing else | • | | |
| claim. If mo | | rticular claim, list the other | claim, list the creditor separately for eac er creditors in Part 2. As much as ditor's name. | Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 GM Financi | ial | | | \$23,426.00 | \$17,225.00 | \$6,201.00 |
| Creditor's Na | | Describe the propert | y that secures the claim: | | | |
| PO 183834 Number | Street | - Chevrolet, Cruz Valu | e: \$17,225.00 | | | |
| Number | Olicci | As of the date you fil | e, the claim is: Check all that apply. | | | |
| | | Contingent | | | | |
| Arlington City | Texas 76096 State ZIP Code | Unliquidated | | | | |
| • | the debt? Check one. | Disputed | | | | |
| ✓ Debtor | | Nature of lien. Check | all that apply. | | | |
| Debtor | • | An agreement you | u made (such as mortgage or secured | | | |
| | 1 and Debtor 2 only | car loan) | Thade (such as mongage of secured | | | |
| | one of the debtors and | Statutory lien (suc | h as tax lien, mechanic's lien) | | | |
| another | | Judgment lien from | | | | |
| | if this claim relates to a unity debt | Other (including a | | - | | |
| | was incurred 3/1/2015 | Last 4 digits of acco | unt number7117 | <u> </u> | | |
| | Add the dollar value of you here: | ur entries in Column A | on this page. Write that number | \$23,426.00 | | |

| | | 0 10 04040 |) D. 4 E'la | -1 00/44/40 | E - 1 1 0 | 0/44/40 44 00 | 07 | 14-1- | |
|--------|--|---|---|---|--|---------------------------------|--------------|------------------|--------------------|
| Fill i | n this informa | Case 16-04212 ation to identify your case | | n U2/11/16 | Enteren U | 2/11/16 11:23: | u/ Desc | Main | |
| Deb | tor 1 | Shanita First Name | Middle Name | Floyd Last Na | ame | - | | | |
| | tor 2 ouse, if filing) | First Name | Middle Name | Last Na | ame | - | | | |
| Unit | ed States Ba | nkruptcy Court for the: | Northern | District of Illi (S | nois tate) | _ | | | |
| | e number lown) | | | | | _ | | | |
| Off | icial Fo | orm 106E/F | | | | | Ched | ck if this is an | amended filing |
| Sc | hedu | le E/F: Cre | ditors Who | Have U | nsecure | ed Claims | | | 12/15 |
| the b | Do any cre No. Go Yes. List all of yidentify wha | edule D: Creditors Who e left. Attach the Contin All of Your PRIORIT editors have priority unso to to Part 2. | uation Page to this pa Y Unsecured Clair secured claims against claims. If a creditor has aim has both priority and | ge. On the top of a ms you? more than one prior nonpriority amounts, | ny additional pa | nges, write your name | and case num | ber (if know | h claim listed, |
| | Part 1. If me | t the claims in alphabetica ore than one creditor hold lanation of each type of c | ls a particular claim, list t | the other creditors in | Part 3. | , , | · | | |
| | | | | | | | Total claim | Priority amount | Nonpriority amount |
| | Priority Cree P.O. Box 734 Number Philadelphia City Who incur Debtor Debtor Debtor At least Check | Pennsylvania State red the debt? Check one 1 only | a 19101 Zip Code e. | Contingent Unliquidated Disputed Type of PRIORITY Domestic supp Taxes and certa Claims for dear | bt incurred? I file, the claim is unsecured claim bort obligations ain other debts you th or personal inju | n/a s: Check all that apply. | \$1,200.00 | \$1,200.00 | \$0.00 |
| | Yes | | | | | | | | |

Shanita Case 16-04212 Doc 1 Filed 02/14/1/16 Entered 02/14/14/16 (14-14-12)3:07 Desc Main Debtor 1 Document Page 24 of 67 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 COMENITY BANK/DOTS \$472.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 182789 When was the debt incurred? 2/1/2013 Street Number As of the date you file, the claim is: Check all that apply. Contingent COLUMBUS Ohio 43218 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.2 EAGLE ACNTS \$196.00 Last 4 digits of account number 8541 Nonpriority Creditor's Name 7510 Old Madison Ave When was the debt incurred? 3/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent 46227 Indianapolis Indiana Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.3 KOHLS/CAPONE \$553.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 3004 When was the debt incurred? 12/1/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent Milwaukee Wisconsin 53201 Unliquidated Citv State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No

Yes

Debtor 1 Shanita Case 16-04212 Doc 1 Filed 02/10/1/16 Entered 02/10/1/16 (16/10/10/2)3:07 Desc Main
First Name Document Page 25 of 67

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| Nonpriority Creditor's Name | Total claim | g with 4.5, followed by 4.6, and so forth. | After listing any entries on this page, number them beginning | | |
|--|-------------|---|---|--|--|
| Nonpriority Creditor's Name PO Box 3004 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? No Yes When was the debt incurred? 12/1/2011 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Volter. Specify Volter. Specify Last 4 digits of account number \$600.00 | \$509.00 | Last 4 digits of account number 2006 | | | |
| Number Street As of the date you file, the claim is: Check all that apply. Milwaukee Wisconsin 53201 | | | | | |
| Milwaukee Wisconsin 53201 Unliquidated Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify At least one of the debtors and another Other specify At least one of the debtors and another Other specify At least one of the debtors and another Other specify At least one of the debtors and another Other specify At least one of the debtors and another At least one of the debtors and another Other specify At least one of the debtors and another At least one of the debtors and another Other specify At least one of the debtors and another At least one of the debtors another At least one of the debtors and another At least one of the debtors an | | | | | |
| Milwaukee Wisconsin 53201 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No PLS Financial Services, Inc. Nonpriority Creditor's Name Milwaukee Zip Code Disputed Type of NONPRIORITY unsecured claim: Disputed Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Last 4 digits of account number \$600.00 | | | | | |
| Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No PLS Financial Services, Inc. Nonpriority Creditor's Name Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Last 4 digits of account number \$600.00 | | | Milwaukee Wisconsin 53201 | | |
| Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor Is the claim subject to offset? No PLS Financial Services, Inc. Nonpriority Creditor's Name Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Last 4 digits of account number \$600.00 | | | - , | | |
| Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Last 4 digits of account number \$600.00 | | Disputed | | | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other. Specify Last 4 digits of account number \$600.00 | | Type of NONPRIORITY unsecured claim: | | | |
| At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes 4.5 PLS Financial Services, Inc. Nonpriority Creditor's Name Last 4 digits of account number Last 4 digits of account number \$600.00 | | Student loans | | | |
| Is the claim subject to offset? No Yes 4.5 PLS Financial Services, Inc. Nonpriority Creditor's Name Last 4 digits of account number \$600.00 | nat | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | = | | |
| ✓ No Yes 4.5 PLS Financial Services, Inc. Nonpriority Creditor's Name Last 4 digits of account number | ts | Debts to pension or profit-sharing plans, and other similar debts | Check if this claim relates to a community debt | | |
| Yes Yes | | ✓ Other. Specify | _ | | |
| 4.5 PLS Financial Services, Inc. Nonpriority Creditor's Name Last 4 digits of account number | | _ | ✓ No | | |
| Nonpriority Creditor's Name | | | Yes | | |
| | \$600.00 | Last 4 digits of account number | 4.5 PLS Financial Services, Inc. | | |
| | | When was the debt incurred?n/a | One South Wacker Drive, 36th Floor | | |
| Number Street As of the date you file, the claim is: Check all that apply. | | As of the date you file, the claim is: Check all that apply. | Number Street | | |
| Chicago Contingent Contingent | | Contingent | Chicago Illinoia COCOC | | |
| Chicago Illinois 60606 City State Zip Code Unliquidated | | Unliquidated | | | |
| Who incurred the debt? Check one. Disputed | | Disputed | | | |
| Type of NONPRIORITY unsecured claim: | | Type of NONPRIORITY unsecured claim: | Debtor 1 only | | |
| Debtor 2 only Student loans | | Student loans | | | |
| Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that | nat | Obligations arising out of a separation agreement or divorce that | <u>'</u> | | |
| At least one of the debtors and another you did not report as priority claims | | | At least one of the debtors and another | | |
| Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts | ts | | | | |
| Is the claim subject to offset? Other. Specify Other. Specify | | ✓ Other. Specify | | | |
| ✓ No | | | | | |
| Yes | | | | | |
| 4.6 SYNCB/AMAZON Nonpriority Creditor's Name Last 4 digits of account number \$475.00 | \$475.00 | Last 4 digits of account number | 4.6 SYNCB/AMAZON Nonpriority Creditor's Name | | |
| PO BOX 965015 When was the debt incurred? 4/1/2012 | | When was the debt incurred? 4/1/2012 | PO BOX 965015 | | |
| Number Street As of the date you file, the claim is: Check all that apply. | | As of the date you file, the claim is: Check all that apply. | Number Street | | |
| Contingent | | Contingent | | | |
| ORLANDO Florida 32896 City State Zip Code Unliquidated | | Unliquidated | | | |
| Who incurred the debt? Check one. Disputed | | | · | | |
| Debtor 1 only Type of NONPRIORITY unsecured claim: | | | Debtor 1 only | | |
| Debtor 2 only Student loans | | <u>~</u> | Debtor 2 only | | |
| Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that | nat | | Debtor 1 and Debtor 2 only | | |
| At least one of the debtors and another you did not report as priority claims | M. | you did not report as priority claims | At least one of the debtors and another | | |
| Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts | | | Check if this claim relates to a community debt | | |
| Is the claim subject to offset? Other. Specify Other. Specify | | | Check if this claim relates to a community debt | | |
| ✓ No □ ves | | | Is the claim subject to offset? | | |

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Document Page 26 of 67 Debtor 1 Shanita Case 16-04212 First Name Doc 1

| Part 2: Your NONPRIORITY U | insecured Claims - Cont | tinuation Page | |
|--|-----------------------------------|---|-------------|
| After listing any entries on this | page, number them beginnir | ng with 4.5, followed by 4.6, and so forth. | Total claim |
| 4.7 The Loan Machine Nonpriority Creditor's Name 3901 S Archer Ave Number Street | | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. | \$2,000.00 |
| Chicago Illino City State Who incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this claim relates Is the claim subject to offset? No Yes | e Zip Code k one. d another | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |

Debtor 1 Shanita Case 16-04212 Doc 1 Filed 02/14/1/16 Entered 02/14/14/16 (Ashina 3:07 Desc Main

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6i. Other. Add all other nonpriority unsecured claims. Write that 6i.

amount here.

6j. Total. Add lines 6f through 6i.

Page 27 of 67

\$4,805.00

6j.

Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$1,200.00 6b. Taxes and certain other debts you owe the 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that \$0.00 amount here. 6e. Total. Add lines 6a through 6d. \$1,200.00 **Total claims** \$0.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or divorce 6g. that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h.

| | Case 16-042 | 212 Doc 1 File | ed 02/11/16 | Entered 02 | <u>/1</u> 1/16 11:23:07 | Desc Main |
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| Fill in this | information to identify your o | | | | 1,10 11.20.01 | Dood Main |
| Debtor 1 | Shanita | | Floyd | | | |
| | First Name | Middle Name | e Last N | lame | | |
| Debtor 2 | | | | | | |
| (Spouse, | if filing) First Name | Middle Name | e Last N | lame | | |
| United S | tates Bankruptcy Court for the | e: Northern | District of I | linois | | |
| Case nur | mhar | | (| State) | | |
| (If known) | | | | | | |
| 0 (() | = | | | | <u> </u> | Check if this is a |
| Offic | ial Form 1060 | G | | | | amended filing |
| Scho | dule G: Execu | _ .tory Contrac | te and Hr | avnired I | 03606 | 40/4 |
| Scrie | dule G. Lxect | atory Contrac | is and or | iexpireu L | cases | 12/1 |
| space is ı | | • | | • | | ing correct information. If more onal pages, write your name and |
| 1. Do v | ou have any executo | ry contracts or unex | pired leases? | | | |
| | lo. Check this box and file this | | | ou have nothing else | to report on this form. | |
| ✓ Y | es. Fill in all of the information | n below even if the contracts | s or leases are listed | on <i>Schedule A/B: Pl</i> | roperty (Official Form 106A | /B). |
| | | | | | | ase is for (for example, rent, |
| vehic | le lease, cell phone). See th | ne instructions for this form i | n the instruction boo | klet for more example | es of executory contracts an | d unexpired leases. |
| | | | | | | |
| ı | Person or company with wi | hom you have the contract | ct or lease | | State what the contrac | t or lease is for |
| 2.1 \/ir | ginia Falkner | | | | Other, | |
| | ime | | | <u>—</u> | Other, | |
| 90 | 08 S Union | | | | Residential Lease | |
| _ | imber Street | | | | | |
| Ch | nicago | Illinois 6 | 0620 | | | |
| Cit | • | | ip Code | | | |

| | | Case 16-0421 | 2 Doc 1 Filed 0 | 12/11/16 Entored | <u>02/1</u> 1/16 11:23:07 | Desc Main |
|---------------|----------------------------|--|---|----------------------------------|------------------------------------|--|
| Fill | in this inform | nation to identify your case | | | 027.1/10 11.23.07 | Desc Main |
| De | btor 1 | Shanita | | Floyd | | |
| | | First Name | Middle Name | Last Name | | |
| | btor 2 oouse, if filing | First Name | Middle Name | Last Name | | |
| Un | ited States B | ankruptcy Court for the: | Northern | District of Illinois | | |
| | se number | | | (State) | | |
| (| | | | | | Check if this is a amended filing |
| Oí | fficial F | Form 106H | | | | amended illing |
| | | e H: Your Co | odebtors | | | 12/1: |
| toge in th | ether, both a | are equally responsible the left. Attach the Add | for supplying correct inform | mation. If more space is nee | ded, copy the Additional Pag | If two married people are filing ge, fill it out, and number the entries ase number (if known). Answer |
| 1. | Do you ha | ve any codebtors? (If yo | ou are filing a joint case, do no | t list either spouse as a codebt | or.) | |
| 2. | Louisiana, N | | ived in a community proper erto Rico, Texas, Washington, | • • | unity property states and territor | ries include Arizona, California, Idaho, |
| | Yes. [| | oouse, or legal equivalent live v | with you at the time? | | |
| | | | tate or territory did you live? | Fil | l in the name and current addres | ss of that person. |
| | | Name of your spouse, for | ormer spouse, or legal equival | ent | _ | |
| | | Number Street | | | _ | |
| | | City | State | Zip Code | _ | |
| 3. | as a codeb | otor only if that person i | s a guarantor or cosigner. I | Make sure you have listed th | | t the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> olumn 2. |
| | Column 1: | Your codebtor | | | Column 2: The creditor to | whom you owe the debt |

Check all schedules that apply:

| Fill in this | information to identify | your case: | | | 1/16 11 | :23:07 | Desc Ma | ain | |
|--------------------------|--|--|------------------------------|--------------------|-----------------------|---------------|------------------------------------|----------|---------------------------|
| Debtor 1 | Shanita | Docui | Floyd | c 50 01 | 01 | | | | |
| JODIOI 1 | First Name | Middle Name | Last Name | | - | | | | |
| Debtor 2 | | | | | _ | Check if this | | | |
| Spouse, if fili | ing) First Name | Middle Name | Last Name | | | _ | nded filing | | |
| Jnited States | s Bankruptcy Court for the: | Northern | District of Illinois (State) | | _ | | ement showing es as of the folk | | petition chapter date: |
| Case numbei If known) | r | | () | | - | MM / D | D / YYYY | | |
| Official | Form 106l | | | | | | | | |
| ched | ule I: Your Inc | ome | | | | | | | 12/ |
| nformation ages, writ | n about your spouse | r spouse. If you are sep e. If more space is needo se number (if known). A nt | ed, attach a se | parate s | | | | | |
| | ill in your employment | | Debtor 1 | | | Debtor 2 | 2 | | |
| | | Employment status | ✓ Employed | | | Emplo | ved | | |
| lf : jo | you have more than one h | | Not Employed | 1 | | | nployed | | |
| | ttach a separate page with | Occupation | | • | | | pioyou | | |
| | information about additional | Occupation | | | | | | | |
| ы | mployers. | Employer's name | Chicago Public S | chools | | | | | |
| In or | clude part time, seasonal, | Employer's address | 125 S. Clark | | | | | | |
| | elf-employed work. | | Number Street | | | Number Str | eet | | |
| 0 | occupation may include | | | | | | | | |
| | tudent | | | | | | | | |
| or | r homemaker, if it applies. | | Chicago | Illinois | 60603 | | | | |
| | | | City | State | Zip Code | City | Sta | ite | Zip Code |
| | | How long employed there? | | | | | | | |
| | | now long employed there. | | | | | | | |
| art 2: G | Sive Details About I | Monthly Income | | | | | | | |
| | | | | | | | | | |
| Estimate mare separate | | date you file this form. If you h | ave nothing to repor | t for any lin | e, write \$0 in the s | space. Includ | le your non-filin | g spou | ise unless you |
| | r non-filing spouse have mo sheet to this form. | re than one employer, combine the | ne information for all | employers | for that person on | | - | l more | space, attach |
| | | | | For | Debtor 1 | For Debt | or 2 or g spouse | | |
| deduct | tions.) If not paid monthly, cal | y, and commissions (before all lculate what the monthly wage wo | ould be. | | \$4,071.17 | | | | |
| 3. Estima | ate and list monthly overt | ime pay. | 3. | | + \$0.00 | | | <u>.</u> | |
| 4. Calcul | late gross income. Add line | e 2 + line 3. | 4. | | \$4,071.17 | | | _[| |

Filed 02/13/1/16 Debtor 1 Shanita Case 16-04212 Entered @2411/116 11:23:07 Desc Main Doc 1 Documentame Page 31 of 67 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4. \$4,071.17 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$676.69 5b. Mandatory contributions for retirement plans 5b. \$74.17 5c. Voluntary contributions for retirement plans 5c. \$65.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$73.52 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$93.47 5h. Other deductions. Specify: 5h. + \$11.42 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$994.26 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$3,076.91 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$0.00 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$0.00 settlement, and property settlement. 8c. 8d. Unemployment compensation \$0.00 8d. 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies \$0.00 Specify: 8f. 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$3.076.91 \$3.076.91 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 11. + 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$3,076.91 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No Yes. Explain:

Debtor 1 Shanita Case 16-04212 Doc 1 Filed 02/13/1/16 Entered 02/13/1/16 11:23:07 Desc Main
First Name Middle Name Documentame Page 32 of 67

Part 2: Give Details About Monthly Income

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|---------------------------------------|--------------|-----------------------------------|
| 5h.Other payroll deductions. Specify: | | |
| 1. accident insurance | \$1.80 | |
| 2 Vision | \$9.62 | |

| Fill in this info | Case 16-04212 | |)2/11/16 Entered | 02/11/16 11:23:07 | Desc M | ain |
|------------------------------|--|---|--|---|-----------------------|--------------------|
| FIII IN THIS INTO | ormation to identify your case | ? : | · · | | | |
| Debtor 1 | Shanita | B.C.I.H. Bloom | Floyd | | | |
| Dobtor 2 | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if fili | ing) First Name | Middle Name | Last Name | _ | 200 | |
| | | | | An amended filir A supplement sh | Ü | atition chanter 13 |
| United States | s Bankruptcy Court for the: | Northern | District of Illinois (State) | expenses as of t | • | • |
| Case number | r | | | | | |
| (If known) | | | | MM / DD / YYY | Y | |
| Official | Form 106J | | | | | |
| | | noncoc | | | | 40/4 |
| Scriedi | ıle J: Your Ex | penses | | | | 12/1 |
| nformation. I | | | | ually responsible for supplyir itional pages, write your nam | | umber |
| | scribe Your Househo | old | | | | |
| 1. Is this a jo | | 14 | | | | |
| | Go to line 2 | | | | | |
| | | | | | | |
| Yes. | Does Debtor 2 live in a se | parate household? | | | | |
| | No | | | | | |
| | Yes. Debtor 2 must file | Official Forms 106J-2, Experi | nses for Separate Household of | Debtor 2. | | |
| 2. Do you h a | ave dependents? 🗸 No | D | | | | |
| Do not list Debtor 2. | | es. Fill out this information for ach dependent | Dependent's relationsh Debtor 1 or Debtor 2 | ip to Dependent's age | Does dep with you? | pendent live |
| • | expenses include | | | | | |
| expenses than | of people other |) | | | | |
| yourself a | ind your | es . | | | | |
| depender | nts? | | | | | |
| Part 2: Est | timate Your Ongoing | Monthly Expenses | | | | |
| • | s of a date after the bankru | | | supplement in a Chapter 13 o k the box at the top of the for | • | |
| | | ash government assistance on Schedule I: Your Incom | | | | Your expenses |
| | al or home ownership exporting for the ground or lot. 4. | enses for your residence. In | nclude first mortgage payments | and | 4. | \$700.00 |
| If not in | cluded in line 4: | | | | | |
| 4a. Real | estate taxes | | | | 4a | \$0.00 |
| 4b. Prop | erty, homeowner's, or renter | 's insurance | | | 4b. | \$0.00 |
| | | | | | | φοιου |

\$0.00

4d.

4d. Homeowner's association or condominium dues

Debtor 1 Shanita Case 16-04212 Doc 1 Filed 02/14/1/16 Entered 02/41/1/16 @13/3:07 Desc Main

| First Name | Middle Name Docume Name Page 34 of 67 | | | | |
|--|--|--------|---------------|--|--|
| | | | Your expenses | | |
| 5. Additional mortgage payme | nts for your residence, such as home equity loans | 5. | \$0.00 | | |
| 6. Utilities: | | | | | |
| 6a. Electricity, heat, natural ga | as | 6a. | \$400.00 | | |
| 6b. Water, sewer, garbage co | ollection | 6b. | \$0.00 | | |
| 6c. Telephone, cell phone, Inte | ernet, satellite, and cable services | 6c. | \$250.00 | | |
| 6d. Other. Specify: | 6d | \$0.00 | | | |
| 7. Food and housekeeping su | 7. Food and housekeeping supplies | | | | |
| 8. Childcare and children's ed | 8. | \$0.00 | | | |
| 9. Clothing, laundry, and dry c | leaning | 9. | \$100.00 | | |
| 10. Personal care products and | d services | 10. | \$100.00 | | |
| 11. Medical and dental expense | es | 11. | \$50.00 | | |
| 12. Transportation. Include gas Do not include car payments | | 12. | \$300.00 | | |
| 13. Entertainment, clubs, recre | eation, newspapers, magazines, and books | 13. | \$0.00 | | |
| 14. Charitable contributions a | nd religious donations | 14. | \$0.00 | | |
| 15. Insurance. | ustad fram usus animali idad in lines 4 an 00 | | | | |
| 15a. Life insurance | ucted from your pay or included in lines 4 or 20. | 45- | \$0.00 | | |
| 15b. Health insurance | | 15a | \$0.00 | | |
| 15c. Vehicle insurance | | 15b | \$176.00 | | |
| | r | 15c | \$0.00 | | |
| | leducted from your pay or included in lines 4 or 20. | 15d | <u> </u> | | |
| | | | \$0.00 | | |
| | | 16 | | | |
| 17. Installment or lease payme | | | • | | |
| 17a. Car payments for Vehicle | | 17a | \$0.00 | | |
| 17b. Car payments for Vehicle | | 17b | \$0.00 | | |
| | - | 17c | \$0.00 | | |
| 17d. Other. Specify: | | 17d | \$0.00 | | |
| | maintenance, and support that you did not report as deducted from the I, Your Income (Official Form 106I). | 18. | \$0.00 | | |
| , , | to support others who do not live with you. | 10. | | | |
| Specify: | | 19. | \$0.00 | | |
| 20.Other real property expense | es not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | | | |
| 20a. Mortgages on other prop | perty | 20a | \$0.00 | | |
| 20b. Real estate taxes 20b. | | 20b | \$0.00 | | |
| 20c. Property, homeowner's, o | or renter's insurance | 20c | \$0.00 | | |
| 20d. Maintenance, repair, and | upkeep expenses 20d. | 20d | \$0.00 | | |

\$0.00

20e

20e. Homeowner's association or condominium dues

| Debtor 1 Sh | anitaCase 16-04212 | | Filed 02#16√11/16 | <u>Entered_</u> 02/41/11/1166/11 | ∞12∞223: <u>07 Desc</u> | : Main |
|---|---|------------------|-------------------------------|----------------------------------|-------------------------|------------|
| Firs | st Name | Middle Name | Documetht ende | Page 35 of 67 | | |
| 21. Other. Sp | ecify: | | | 3 | 21 | \$0.00 |
| | | | | | | |
| 22. Calculate | your monthly expenses. | | | | | \$2,426.00 |
| 22a. Add I | lines 4 through 21. | | | | | \$0.00 |
| 22b. Copy | | \$2,426.00 | | | | |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | | | | | | |
| 23. Calculate | your monthly net income. | | | | | |
| 23a. Copy | line 12 (your combined mont | hly income) from | Schedule I. | | 23a | \$3,076.91 |
| 23b. Copy | your monthly expenses from I | ine 22 above. | | | 23b | \$2,426.00 |
| 23c. Subtr | act your monthly expenses fro | m your monthly | income. | | | \$650.91 |
| The | result is your monthly net inco | ome. | | | 23c | |
| 24. Do you e | xpect an increase or decrea | ase in your exp | enses within the year aft | er you file this form? | | |
| | nple, do you expect to finish pa e payment to increase or decr | , , , | , | | | |
| _ | o payment to increase or deci | case because c | or a modification to the term | o or your mongage. | | |
| ✓ No | | | | | | |
| Yes | | | | | | |
| | Explain here: | | | | | |
| | | | | | | |

| | | Case 16-0421 | 2 Doc 1 Filad (|)2/11/16 Ent/ | ered 02/11/16 11:23:07 | Doce Main |
|------|---------------------------|-----------------------------|------------------------------|--------------------------|--|-----------------------------------|
| Fill | in this inform | nation to identify your cas | | | -TEIT 11/10 11.23.07 | Desc Main |
| Del | btor 1 | Shanita | | Floyd | | |
| | | First Name | Middle Name | Last Name | | |
| | otor 2 ouse, if filing | First Name | Middle Name | Last Name | | |
| Uni | ted States Ba | ankruptcy Court for the: | Northern | District of Illinois | | |
| 0 | | , , | | (State) | | |
| | se number nown) | | | | | |
| Of | ficial F | Form 106De | <u>·C</u> | | | Check if this is a amended filing |
| De | clarat | ion About a | n Individual De | ebtor's Sch | edules | 12/1 |
| f tw | o married p | eople are filing togethe | er, both are equally respons | sible for supplying co | rrect information. | |
| | _ | | eone who is NOT an attorne | y to help you fill out b | ankruptcy forms? | |
| | ✓ No | | | | | |
| | Yes. N | lame of person | | | ıptcy Petition Preparer's Notice, Decli iicial Form 119). | aration, and |
| × | • | are true and correct. | e that I have read the summ | *_ | ed with this declaration and nature of Debtor 2 | |
| | Date <u>2/11/2</u> | | | Da | te MM/DD/YYYY | |
| | IVIIVI/ | DD/YYYY | | | IVIIVI/UU/YYYY | |

| plete and accurate as poss | Middle N Middle N Northern Northern ial Affairs ible. If two married elet to this form. On | Last Nan District of Illing (Sta | me ois | Check if this is a amended filing |
|--|--|---|--|---|
| f filing) First Name Ites Bankruptcy Court for the: ber al Form 107 ment of Finance plete and accurate as posseded, attach a separate shout You | Middle N Northern ial Affairs lible. If two married leet to this form. On | Last Nan District of Illing (Sta | oisate) | amended filing |
| ber al Form 107 ment of Finance plete and accurate as posseded, attach a separate shouse. | Northern ial Affairs ible. If two married eet to this form. On | District of Illing (Sta | ois ate) | amended filing |
| al Form 107 ment of Finance plete and accurate as posseded, attach a separate shouse. | ial Affairs ible. If two married eet to this form. On | for Individua people are filing together | ate) | amended filing |
| al Form 107 ment of Finance plete and accurate as posseded, attach a separate sho | ible. If two married eet to this form. On | for Individua | | amended filing |
| ment of Finance plete and accurate as posseded, attach a separate sho | ible. If two married eet to this form. On | people are filing together | lls Filing for Bankrup | amended filing |
| ment of Finance plete and accurate as posseded, attach a separate sho | ible. If two married eet to this form. On | people are filing together | ls Filing for Bankrup | |
| plete and accurate as poss eeded, attach a separate sho Give Details About You | ible. If two married eet to this form. On | people are filing together | | tcv 12/1 |
| nat is vour current marital st | | | r, both are equally responsible for suppl pages, write your name and case numb ed Before | |
| iat is your ourient markars | atus? | | | |
| Married Not married | | | | |
| ring the last 3 years, have yo | ou lived anywhere o | ther than where you live I | now? | |
| No Yes. List all of the places you | lived in the last 3 yea | ırs. Do not include where yo | ou live now. | |
| Debtor 1: | | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there |
| | | | Same as Debtor 1 | Same as Debtor 1 |
| Number Street | | From | Number Street | From |
| | | То | | To |
| City State | Zip Code | - | City State Zip 0 | Code |
| | | | Same as Debtor 1 | Same as Debtor 1 |
| Number Street | | From | Number Street | From |
| | | To | | To |
| City State | Zip Code | - | City State Zip 0 | Code |
| | | se or legal equivalent in | | |
| • | • | • . | | |
| n | Yes. List all of the places you Debtor 1: Number Street City State City State City State the last 8 years, did you e | Pebtor 1: Number Street City State Zip Code City State Zip Code City State Zip Code | Pebtor 1: Dates Debtor 1 lived there Number Street City State Zip Code From To City State Zip Code City State Zip Code | Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Dates Debtor 1 lived there |

Part 2: Explain the Sources of Your Income

Debtor 1 ShanitaCase 16-04212 First Name Doc 1 Filed 02/14/1/16 Entered 02/14/146/14/23:07 Desc Main Document Page 38 of 67

| | Fill in the total amount of income you received f | t or from operating a business during this year or the two previous calendar years? from all jobs and all businesses, including part-time ave income that you receive together, list it only once under Debtor 1. | | | | | | |
|--------|---|---|--|--|---|--|--|--|
| | | Debtor 1 | | Debtor 2 | | | | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | |
| | From January 1 of current year until the date you filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips✓ Operating a business | \$3067.00 | Wages, commissions, bonuses, tips Operating a business | | | | |
| | For last calendar year: (January 1 to December 31, | ✓ Wages, commissions, bonuses, tips☐ Operating a business | \$39630.00 | Wages, commissions, bonuses, tips Operating a business | | | | |
| | For the calendar year before that: (January 1 to December 31, | ✓ Wages, commissions, bonuses, tips✓ Operating a business | \$39000.00 | Wages, commissions, bonuses, tips Operating a business | | | | |
| l t | Did you receive any other income during this include income regardless of whether that income penefit payments; pensions; rental income; intereand you have income that you received together, List each source and the gross income from each No Yes. Fill in the details. | ne is taxable. Examples of other est; dividends; money collected list it only once under Debtor 1. | income are alimony; child su from lawsuits; royalties; and | gambling and lottery winnings. | • | | | |
| | | Debtor 1 | | Debtor 2 | | | | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | | | |
| | From January 1 of current year until the date you filed for bankruptcy: | | | | | | | |
| | For last calendar year: (January 1 to December 31, 2015) YYYY | | | | | | | |
| | For the calendar year before that: (January 1 to December 31, 2014) YYYY | | | | | | | |

Filed 02/14/16 Entered 02/14/146 (144) 23:07 Desc Main Docume Page 39 of 67 Debtor 1 Shanita Case 16-04212 First Name Doc 1

| Pa | art 3: | List Ce | rtain Pa | yments Y | ou Made Before | You Filed for Bar | nkruptcy | | |
|----|---|------------------|-------------|---------------|--|----------------------------|--|-----------------------------|--|
| 6. | Are e | either Deb | otor 1's or | Debtor 2's | debts primarily con | sumer debts? | | | |
| | | | | | or 2 has primarily c sehold purpose." | onsumer debts. Cons | sumer debts are defined in 11 | U.S.C. § 101(8) as "incurre | ed by an individual primarily |
| | | Durin | g the 90 d | ays before y | ou filed for bankruptcy, | did you pay any credito | or a total of \$6,225* or more? | | |
| | | □ ¹ | No. Go to | line 7. | | | | | |
| | | Ξ, | total | amount you | paid that creditor. Do | not include payments for | more in one or more paymen or domestic support obligation attorney for this bankruptcy o | ns, such as | |
| | | * Sub | ject to adj | ustment on 4 | 01/16 and every 3 yea | ars after that for cases f | iled on or after the date of adj | ustment. | |
| | ✓, | Yes. Debt | or 1 or D | ebtor 2 or b | oth have primarily o | consumer debts. | | | |
| | | Durin | g the 90 d | ays before yo | ou filed for bankruptcy, | did you pay any credito | or a total of \$600 or more? | | |
| | | ✓ ! | No. Go to | line 7. | | | | | |
| | Yes. List below each creditor to whom you perfect that creditor. Do not include payments alimony. Also, do not include payments | | | | not include payments | for domestic support of | bligations, such as child supp | | |
| | | | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| | | Creditor's | | | | | _ | | Mortgage Car Credit card Loan repayment Suppliers or |
| | | City | | State | Zip Code | | | | vendors Other |
| | | Creditor's | s Name | | | | | _ | Mortgage |
| | | Number | Street | | | | | | Car Credit card |
| | | | | | | | | | Loan repayment |
| | | <u> </u> | | | | | | | Suppliers or |
| | | City | | State | Zip Code | | | | vendors Other |
| | | Creditor's | s Name | | | | | | ─ |
| | | Number | Street | | | | | | Credit card |
| | | | | | | | | | Loan repayment |
| | | City | | State | Zip Code | | | | Suppliers or vendors |
| | | J., | | Julio | <u> </u> | | | | Other |

Shanita Case 16-04212 Doc 1 Filed 02/16/1/16 Entered 02/11/16 (164):23:07 Desc Main Debtor 1 Document Page 40 of 67 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 ShanitaCase 16-04212 First Name Filed 02/14/1/16 Entered 02/14/146/14/23:07 Desc Main Document Page 41 of 67 Doc 1

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

| L | | such matters, includ | | | party in any lawsuit, o ims actions, divorces, o | | | | tody modifications, and contract |
|---|------------|---|-----------------------|--------|---|--------------|---------|-----------|----------------------------------|
|] | <u>√</u> ト | lo 'es. Fill in the details. | | | | | | | |
| | | | | Nature | of the case | Court or age | ency | | Status of the case |
| | | Case title | | | | | | | Pending |
| | | | | - | | Court Name | | | On appeal |
| | | Case number | | | | Number Stre | et | | Concluded |
| | | - | | - | | | | | |
| | | Constitute | | | | City | State | Zip Code | |
| | | Case title | | | | Count Name | | | Pending |
| | | Casa number | | _ | | Court Name | | | On appeal |
| | | Case number | | | | Number Stre | et | | Concluded |
| | | | | _ | | City | State | Zip Code | • |
| | □ | No. Go to line 11. Yes. Fill in the inform | nation below. | | Describe the proper | rty | | Date | Value of the property |
| | | GM Financial | | | 2014 Chevy Cruz | | | 2/10/2016 | <u>\$0</u> |
| | | Creditor's Name | | | | | | | |
| | | PO 183834 | | | Explain what happe | ned | | | |
| | | Number Street | | | | | | | |
| | | Arlington | | 6096 | ✓ Property was rep | | | | |
| | | City | State Zi _l | o Code | Property was fore Property was gar | | | | |
| | | | | | Property was atta | | levied. | | |
| | | | | | Describe the proper | rty | | Date | Value of the property |
| | | | | | | | | | |
| | | Creditor's Name | | | | | | | |
| | | - | | | Explain what happe | ned | | | |
| | | Number Street | | | - | | | | |
| | | - | | | Property was rep | | | | |
| | | City | State Zi _l | o Code | Property was fore Property was gar | | | | |
| | | | | | Property was atta | | levied. | | |

| Deb | tor 1 | ShanitaCase 16-04212 Doc 1 File First Name Middle Name Do | <u>d 02/16/1/16 Entered 02/16/16/16/16/23:</u> ocum e nt Page 42 of 67 | 07 Desc | <u>Main</u> |
|------|-------|--|--|--------------------------|-------------------------|
| 11. | acco | nin 90 days before you filed for bankruptcy, did any nunts or refuse to make a payment because you owe No Yes. Fill in the details. | creditor, including a bank or financial institution, set of | f any amounts fr | om your |
| | | res. I ili ili tile details. | Describe the action the creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | |
| | | Number Street City State Zip Code | Last 4 digits of account number: XXXX- | | |
| 12. | | | f your property in the possession of an assignee for the | e benefit of credi | tors, a court-appointed |
| | | No Yes | | | |
| Part | 5: I | ist Certain Gifts and Contributions | | | |
| 13. | _ | | give any gifts with a total value of more than \$600 per p | person? | |
| | | No Yes. Fill in the details for each gift. | | | |
| | | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | | |
| | | Person to Whom You Gave the Gift | | | |
| | | Person to Whom You Gave the Gift Number Street | | | |
| | | | | | |
| | | Number Street City State Zip Code | | | |
| | | Number Street City State Zip Code Person's relationship to you | | | |
| | | Number Street City State Zip Code Person's relationship to you Person to Whom You Gave the Gift Number Street City State Zip Code | | | |
| | | Number Street City State Zip Code Person's relationship to you Person to Whom You Gave the Gift Number Street | | | |

| | | i iist ivaine | Diametraline Di | ocument Page 43 of 67 | | |
|------|----------|--|----------------------|--|--------------------------|------------------------|
| 14. | Witl | nin 2 years before you filed for I | | give any gifts or contributions with a total value of mor | re than \$600 to ar | y charity? |
| | ✓ | No | | | | |
| | | Yes. Fill in the details for each gift | t or contribution. | | | |
| | | Gifts with a total value of more | e than \$600 | Describe the gifts | Dates you | Value |
| | | per person | | | gave the gifts | |
| | | Charity's Name | | | | |
| | | | | | | |
| | | | | | | |
| | | Number Street | | | | |
| | | City State | Zip Code | | | |
| | | | _,p | | | |
| Part | 6: | ist Certain Losses | | | | |
| 15. | With | in 1 year before you filed for ba | ankruptcy or since y | ou filed for bankruptcy, did you lose anything because | of theft, fire, other | r disaster, or |
| | gam | bling? | | | | |
| | ✓ | No | | | | |
| | | Yes. Fill in the details. | | | | |
| | | Describe the property you lost | and | Describe any insurance coverage for the loss | Date of your | Value of property lost |
| | | how the loss occurred | | Include the amount that insurance has paid. List pending | loss | |
| | | | | insurance claims on line 33 of Schedule A/B: Property. | | |
| | | | | | | |
| | | _ist Certain Payments or | | | | |
| | Inclu | ing bankruptcy or preparing a l | bankruptcy petition | r anyone else acting on your behalf pay or transfer any? t counseling agencies for services required in your bankrupto | | |
| | ✓ | Yes. Fill in the details. | | | | |
| | | | | Description and value of any property transferred | Date payment or transfer | Amount of payment |
| | | Semrad Law Firm | | Constant Law Firms | was made 2/8/2016 | \$350.00 |
| | | Person Who Was Paid | | Semrad Law Firm - 350.00 | 2/8/2010 | \$330.00 |
| | | 20 South Clark Street 28th Floor | | | | |
| | | Number Street | | | | |
| | | Chicago Illinois | 60606 | | | |
| | | City State | Zip Code | | | |
| | | Email or website address | | | | |
| | | | | | | |
| | | Person Who Made the Payment, i | if Not You | | | |
| | | Person Who Was Paid | | • | | |
| | | Number Street | | | | |
| | | | | | | |
| | | | | | | |
| | | City State | Zip Code | | | |
| | | Email or website address | | | | |
| | | Person Who Made the Payment, i | if Not You | | | |
| | | | | | | |

Filed 02/10/1/16 Entered 02/10/10/16 @102/3:07 Desc Main

| | First Name N | Aiddle Name D | ocument Page 44 of | 6/ | | | |
|-------|--|--------------------|--|-------------------------|-----------------------------------|------------|-------------------------------------|
| you (| nin 1 year before you filed for ban deal with your creditors or to mak ot include any payment or transfer th | kruptcy, did you c | or anyone else acting on your behalf our creditors? | | oroperty to anyo | ne who į | promised to he |
| | No Yes. Fill in the details. | | | | | | |
| _ | | | Description and value of any pro | perty transferred | Date payment or transfer was made | Amou | nt of payment |
| | Person Who Was Paid | | - | | | | |
| | Number Street | | _ | | | | |
| | City State | Zip Code | _ | | | | |
| trans | fers that you have already listed on the No Yes. Fill in the details. | | ity (such as the granting of a security in | | , - w. p. sporty). De | | g aa |
| | | | Description and value of any property transferred | | property or paymebts paid in exch | | Date transfe was made |
| | Person Who Received Transfer | | - | | | | |
| | Number Street | | _ | | | | |
| | City State Person's relationship to you | Zip Code | | | | | |
| | | | | | | | |
| | Person Who Received Transfer | | - | | | | |
| | Person Who Received Transfer Number Street | | - | | | | |
| | | Zip Code | - - - | | | | |
| | Number Street City State Person's relationship to you | ankruptcy, did you | u transfer any property to a self-sett | led trust or similar de | evice of which yo | ou are a l | beneficiary? |
| (The | Number Street City State Person's relationship to you in 10 years before you filed for b. | ankruptcy, did you | - - - u transfer any property to a self-sett | led trust or similar de | evice of which yo | ou are a l | beneficiary? |
| (The | Number Street City State Person's relationship to you in 10 years before you filed for bese are often called asset-protection. | ankruptcy, did you | u transfer any property to a self-sett Description and value of the pro | | evice of which yo | ou are a l | beneficiary? Date transferwas made |

Debtor 1 ShanitaCase 16-04212 Doc 1 Filed 02/14/1/16 Entered 02/14/14/16 (1/14) 23:07 Desc Main

Debtor 1 ShanitaCase 16-04212 First Name Filed 02/14/16 Entered 02/14/16/14/23:07 Desc Main Document Page 45 of 67 Doc 1

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

| 20. | or tra | ansferred? | gs, money marl | ket, or other financ | cial account | | | n your name, or for you | | |
|-----|----------|---|----------------|----------------------|--------------|----------------------------|-----------------|--------------------------|---|---|
| | | No Yes. Fill in the deta | ails. | | | | | | | |
| | | | | | Last 4 | 4 digits of account eer | Type of instrum | account or nent | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | | Person Who Was | Paid | | — xxxx | - | | ecking rings | | |
| | | Number Street | | | | | Bro | ney market kerage | | |
| | | City | State | Zip Code | | | U Oth | er | | |
| | | Person Who Was | Paid | | — XXXX | - | | ecking rings | | |
| | | Number Street | | | | | | ney market kerage | | |
| | | City | State | Zip Code | | | Oth | er | | |
| 21. | valu | ou now have, or ables? No Yes. Fill in the deta | · | vitnin i year bei | | had access to it? | ny sare deposi | t box or other depositor | | Do you still have it? |
| | | Name of Financia | al Institution | | Name | | | | | ☐ No |
| | | Number Street | | | Number | Street | | | | Yes |
| | | City | State | Zip Code | City | State | Zip Code | | | |
| 22. | ✓ | | | ge unit or place | other than | your home within | 1 year before y | ou filed for bankruptcy | ? | |
| | | | | | Who else | had access to it? | | Describe the contents | S | Do you still have it? |
| | | Name of Storage | Facility | | Name | | | | | ☐ No ☐ Yes |
| | | Number Street | | | Number | Street | | | | ☐ 162 |
| | | City | State | Zip Code | City | State | Zip Code | | | |

| art 9: | II GANTITY PROPERTY YOU HOLD OF CONTR | -1 (O E) | | |
|----------------|---|--|---|------------------|
| | | ol for Someone Else | | |
| 3. Do | you hold or control any property that someor | ne else owns? Include any property you bor | rowed from, are storing for, or hold in tr | ust for someone. |
| ¥ | No Yes. Fill in the details. | | | |
| _ | | Where is the property? | Describe the contents | Value |
| | Owner's Name | Number Street | | |
| | | _ | | |
| | Number Street | City State Zip Code | | |
| | City State Zip Code | _ | | |
| art 10: | Give Details About Environmental I | nformation | | |
| or the | purpose of Part 10, the following definitions apply: | | | |
| • | Environmental law means any federal, state, or loc | al statute or regulation concerning pollution, con | tamination, releases of | |
| - | hazardous or toxic substances, wastes, or material including statutes or regulations controlling the cle | into the air, land, soil, surface water, groundwater | | |
| | Site means any location, facility, or property as defin | · | ow own, operate, or utilize it | |
| | or used to own, operate, or utilize it, including disp | • | n om, operate, er umze n | |
| | Hazardous material means anything an environmen | | s substance, | |
| 1 | toxic substance, hazardous material, pollutant, con | taminant, or similar term. | | |
| Report | all notices, releases, and proceedings that you kno | w about, regardless of when they occurred. | | |
| 4. Ha | | | | |
| | s any governmental unit notified you that you | may be liable or potentially liable under or i | n violation of an environmental law? | |
| ✓ | s any governmental unit notified you that you | may be liable or potentially liable under or i | n violation of an environmental law? | |
| <u>~</u> | | may be liable or potentially liable under or i | n violation of an environmental law? | |
| <u> </u> | No | may be liable or potentially liable under or i | n violation of an environmental law? Environmental law, if you know it | Date of notice |
| _ | No | | | Date of notice |
| _ | No Yes. Fill in the details. | Governmental unit | | Date of notice |
| | No Yes. Fill in the details. Name of site Number Street | Governmental unit Governmental unit Number Street | | Date of notice |
| | No Yes. Fill in the details. Name of site | Governmental unit Governmental unit | | Date of notice |
| 5. Ha | No Yes. Fill in the details. Name of site Number Street | Governmental unit Governmental unit Number Street City State Zip Code | | Date of notice |
| ✓ 5. Ha | No Yes. Fill in the details. Name of site Number Street City State Zip Code Ive you notified any governmental unit of any in the site of the site | Governmental unit Governmental unit Number Street City State Zip Code | | Date of notice |
| 5. Ha | No Yes. Fill in the details. Name of site Number Street City State Zip Code Ive you notified any governmental unit of any in the details. | Governmental unit Governmental unit Number Street City State Zip Code release of hazardous material? | Environmental law, if you know it | |
| 5. Ha | No Yes. Fill in the details. Name of site Number Street City State Zip Code Ive you notified any governmental unit of any in the site of the site | Governmental unit Governmental unit Number Street City State Zip Code | | |
| 5. Ha | No Yes. Fill in the details. Name of site Number Street City State Zip Code Ive you notified any governmental unit of any in the site of the site | Governmental unit Governmental unit Number Street City State Zip Code release of hazardous material? | Environmental law, if you know it | |
| 5. Ha | No Yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any in the details. | Governmental unit Governmental unit Number Street City State Zip Code release of hazardous material? Governmental unit | Environmental law, if you know it | Date of notice |
| 5. Ha | No Yes. Fill in the details. Name of site Number Street City State Zip Code Inve you notified any governmental unit of any in the details. No Yes. Fill in the details. | Governmental unit Governmental unit Number Street City State Zip Code release of hazardous material? Governmental unit Governmental unit | Environmental law, if you know it | |

Debtor 1 ShanitaCase 16-04212 Doc 1 Filed 02/10/1/16 Entered 02/41/1/16 @103/3:07 Desc Main

| Debtor | 1 | ShanitaCase 16-04212 First Name | Doc 1 F | <u>-iled 02≠16⁄16/16 E</u> Documental | ntered @2/41/1 ge 47 of 67 | h166/1k12bi23: <u>07 [</u> | Desc Main | |
|---------|---------------|---------------------------------|---|---|----------------------------------|----------------------------|---|--|
| 26. H | av | e you been a party in any judio | cial or administrat | ive proceeding under any | environmental law | ? Include settlements a | nd orders. | |
| □ | <u>'</u> | No Yes. Fill in the details. | | | | | | |
| | | | | Court or agency | | Nature of the case | Status of the case | |
| | | Case title | | | | | Pending | |
| | | | | Court Name | | | On appeal | |
| | | | | Number Street | | | Concluded | |
| | | Case number | | City State | Zip Code | | | |
| Part 11 | : | Give Details About Your | Business or (| Connections to Any E | Business | | | |
| 27. W | | <u> </u> | ployed in a trade, p ity company (LLC) aging executive of a the voting or equity so to Part 12. | rofession, or other activity, e or limited liability partnership corporation securities of a corporation | ither full-time or part- | | ousiness? | |
| | | | | Describe the nature | of the business | | ntification number Do not Security number or ITIN. | |
| | Business Name | | | | EIN: | | | |
| | | Number Street | | Name of accountan | Name of accountant or bookkeeper | | s existed | |
| | | City State | Zip Code | | | FromTo | | |
| | | | | Describe the nature | of the business | | ntification number Do not Security number or ITIN. | |
| | | Business Name | | | | EIN: | | |
| | | Number Street | | Name of accountan | t or bookkeeper | Dates business | s existed | |
| | | City State | Zip Code | | | From | То | |
| | | | | Describe the nature | of the business | | ntification number Do not Security number or ITIN. | |
| | | Business Name | | _ | | EIN: | | |
| | | Number Street | | Name of accountan | t or bookkeener | Dates business | s existed | |
| | | City State | Zip Code | | | From | То | |
| | | | | | | | | |

| Debtor 1 | | | | | Desc Main |
|----------|---|-----------------------------|-------------------------------|---|-----------------------------------|
| | First Name | Middle Nam | e Documethit ^{me} | Page 48 of 67 | |
| | thin 2 years before you editors, or other parties. | • | y, did you give a financial s | statement to anyone about your business? Ind | clude all financial institutions, |
| ✓ | No Yes. Fill in the details be | alow | | | |
| | res. I ili ili tile details be | NOW. | Date issued | | |
| | Name | | MM/DD/YYYY | | |
| | Number Street | | | | |
| | City | State Zip | Code | | |
| Part 12: | Sign Below | | | | |
| and | correct. I understand th kruptcy case can result | nat making a false | statement, concealing prop | ttachments, and I declare under penalty of per perty, or obtaining money or property by frauc p to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1 | l in connection with a |
| | Signaturo | of Debtor 1 | | Signature of Debtor 2 | |
| | Signature | Di Bobioi I | | Signature of Debtor 2 | <u> </u> |
| | Date 2/11 | | | Date | |
| Did | Date 2/11 | /2016 | ment of Financial Affairs fo | • | Form 107)? |
| _ | Date 2/11 | /2016 | ment of Financial Affairs fo | Date | Form 107)? |
| _ | Date 2/11 you attach additional pa | /2016 | ment of Financial Affairs fo | Date | Form 107)? |
| ✓ | Date 2/11 you attach additional pa No Yes | /2016 ages to Your State | ment of Financial Affairs fo | Date or Individuals Filing for Bankruptcy (Official F | Form 107)? |
| Did | Date 2/11 you attach additional pa No Yes | /2016 ages to Your State | | Date or Individuals Filing for Bankruptcy (Official F | |
| Did | Date 2/11 you attach additional pa No Yes you pay or agree to pay | /2016 ages to Your State | | Date or Individuals Filing for Bankruptcy (Official F | Preparer's Notice, |

Case 16-04212 Doc 1 Filed 02/11/16 Entered 02/11/16 11:23:07 Desc Main Document Page 49 of 67

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| n re | Shanita Floyd | | Case No. | |
|------|--|--|---|--|
| _ | Debtor | | | (If known) |
| | | | Chapter | Chapter 13 |
| 1 | DISCLOSURE C Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr year before the filing of the petition in bankruptc in connection w ith the bankruptcy case is as fo | P. 2016(b), I certify that I am the y, or agreed to be paid to me, for | ON OF ATTORNEY FOR I | hat compensation paid to me within one |
| | For legal services, I have agreed to accept | | | \$4,000.00 |
| | Prior to the filing of this statement I have receive | ed | | \$350.00 |
| | Balance Due | | | \$3,650.00 |
| 2 | The source of the compensation paid to me was | : Other (specify) | | |
| 3 | The source of the compensation paid to me is: Debtor | Other (specify) | | |
| 4 | I have not agreed to share the above-discl members and associates of my law firm. | osed compensation with any other | er person unless they are | |
| | I have agreed to share the above-disclose members or associates of my law firm. A of the people sharing in the compensation, is | opy of the agreement, together v | | |
| 5 | i. In return for the above-disclosed fee, I have ag a. Analysis of the debtor's financial situat | | all aspects of the bankruptcy case, including: debtor in determining whether to file a petitio | |
| | b. Preparation and filing of any petition, s | chedules, statements of affairs a | and plan which may be required; | |
| | c. Representation of the debtor at the mo | eeting of creditors and confirmati | ion hearing, and any adjourned hearings the | reof; |
| | d. Representation of the debtor in advers | ary proceedings and other conte | ested bankruptcy matters; | |
| 6 | i. By agreement with the debtor(s), the above-dis | closed fee does not include the f | following services: | |
| | | CERTIFIC | CATION | |
| | I certify that the foregoing is a complete statemen seedings. | of any agreement or arrangeme | ent for payment to me for representation of th | ne debtor(s) in this bankruptcy |
| | 2/11/2016 | | /s/ Daniel Giannola | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

Case 16-04212 Doc 1 Filed 02/11/16 Document

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

Entered 02/11/16 11:23:07 Desc Main

Page 51 of 67 your income is more than the median income for your state of residence and family size, depending on the results of the Means Test, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

> If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| <u> </u> | · · | total fee |
|----------|-------|--------------------|
| + | \$75 | administrative fee |
| | \$235 | filing fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-04212 Doc 1 Filed 02/11/16 Entered 02/11/16 11:23:07 Desc Main UNITED STATES BANKBURICY COURT Northern District of Illinois

| In re: | Floyd, Shanita | Case No | |
|--------|--|---|-----|
| | Debtor(s) | | |
| | | Chapter. Chapter13 | |
| | VERIFIC | ATION OF CREDITOR MATRIX | |
| | The above named Debtors hereby verify that | t the attached list of creditors is true and correct to the best of their knowled | ge. |
| | | | |
| Date: | 2/11/2016 | /s/ Floyd, Shanita | |
| | | Floyd, Shanita | • |

Signature of Debtor

Case 16-04212 Doc 1 Filed 02/11/16 Entered 02/11/16 11:23:07 Desc Main Document Page 55 of 67

GM Financial PO 183834 Arlington , TX 76096

DEPT OF ED/NAVIENT PO Box 9635 Wilkes Barre , PA 18773

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DEPT OF ED/NAVIENT PO Box 9635 Wilkes Barre, PA 18773

KOHLS/CAPONE PO Box 3004 Milwaukee , WI 53201

KOHLS/CAPONE PO Box 3004 Milwaukee , WI 53201

SYNCB/AMAZON PO BOX 965015 ORLANDO , FL 32896

COMENITY BANK/DOTS PO BOX 182789 COLUMBUS , OH 43218

CB/DOTS PO Box 182273 Columbus , OH 43218

EAGLE ACNTS 7510 Old Madison Ave Indianapolis, IN 46227

Internal Revenue Service P.O. Box 7346 Philadelphia , PA 19101

PLS Financial Services, Inc. 920 South Western Ave Chicago , IL 60643

The Loan Machine 3901 S Archer Ave

Chicago , IL 60632

Case 16-04212 Doc 1 Filed 02/11/16 Entered 02/11/16 11:23:07 Desc Main Document Page 56 of 67

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$ 350.00 toward the flat fee, leaving a balance due of \$ 3650.00 ; and \$ 72.00 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 02/08/2016

Signed:

Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

| Door | 02/11/16 Entered | 02/11/16 11:23:07 Case number (if known) | Desc Main |
|---|---|--|---|
| | | 51 07 | , |
| 16a. Are your debts primar as "incurred by an indiv ☐ No. Go to line 16b. ☐ Yes. Go to line 17. 16b. Are your debts primar obtain money for a businvestment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. | rily consumer debts? Cridual primarily for a perseridual primarily for a perserily business debts? Buiness or investment or the | onal, family, or household siness debts are debts the rough the operation of the | d purpose." nat you incurred to e business or |
| Yes. I am filing under Chapter 7 | 7. Do you estimate that after any | | d administrative expenses are |
| ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 50 M | 5,001-50,000 0,001-100,000 ore than 100,000 |
| | \$10,000,001-5 \$50,000,001-5 | \$50 million | 500,000,001-\$1 billion 1,000,000,001-\$10 billion 10,000,000,001-\$50 billion ore than \$50 billion |
| \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,000,001-5 \$50,000,001-5 | \$50 million \$1 \$100 million \$1 | 500,000,001-\$1 billion 1,000,000,001-\$10 billion 10,000,000,001-\$50 billion ore than \$50 billion |
| | | | |
| and correct. If I have chosen to file under or 13 of title 11, United State proceed under Chapter 7. If no attorney represents me fill out this document, I have I request relief in accordance I understand making a false sconnection with a bankruptcy or both. 18 U.S.C. §§ 152, 13 /s/ Shanita Floyd Signature of Debtor 1 Executed on | Chapter 7, I am aware to Scode. I understand the and I did not pay or agree obtained and read the not with the chapter of title statement, concealing processes can result in fines 341, 1519, and 3571. | hat I may proceed, if eliginal relief available under each et to pay someone who is positive required by 11 U.S.C. 11, United States Code, supporty, or obtaining mone up to \$250,000, or imprising the support of the s | ible, under Chapter 7, 11,12, ch chapter, and I choose to s not an attorney to help me C. § 342(b). specified in this petition. ey or property by fraud in |
| | estions for Reporting Purpo 16a. Are your debts primar as "incurred by an indiv No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primar obtain money for a bus investment. No. Go to line 16c. Yes. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts No. I am not filing under Chapter Paid that funds will be available and that funds will be available. Yes. I am filing under Chapter Paid that funds will be available. Yes. 1-49 So-99 100-199 200-999 \$0-\$50,000 \$50,001-\$100,000 \$500,001-\$100,000 \$500,001-\$100,000 \$500,001-\$100,000 \$500,001-\$100,000 \$100,001-\$500,000 \$500,001-\$100,000 \$100,001-\$500,000 \$100,001-\$100,000 \$100,001- | 16a. Are your debts primarily consumer debts? C as "incurred by an individual primarily for a pers No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Bu obtain money for a business or investment or th investment. No. Go to line 16c. Yes. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not cor No. I am not filing under Chapter 7. Go to line 18. Yes. I am filing under Chapter 7. Do you estimate that after any paid that funds will be available to distribute to unsecured No. Yes. Yes. 1-49 1,000-5,000 No. Yes. 1-49 1,000-5,000 100-199 100-199 100-199 100-199 100-199 110,001-\$50,000 150,001-\$100,000 1500,001-\$1100,000 1500,001-\$1100,000 1500,001-\$1100,000 1500,001-\$100,000 1500,001-\$100,000 1500,001-\$100,000 1500,001-\$100,000 1500,001-\$100,000 1100,001-\$500,000 1500,001-\$100,000 1100,001-\$10,000 1100,001-\$100,000 | estions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are define as "incurred by an individual primarily for a personal, family, or househol No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts the obtain money for a business or investment or through the operation of the investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business of the total paid that funds will be available to distribute to unsecured creditors? No. I am notifiling under Chapter 7. Do you estimate that after any exempt property is excluded an paid that funds will be available to distribute to unsecured creditors? No. Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded an paid that funds will be available to distribute to unsecured creditors? No. Yes. Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded an paid that funds will be available to distribute to unsecured creditors? No. Yes. Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded an paid that funds will be available to distribute to unsecured creditors? No. Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded an paid that funds will be available to distribute to unsecured creditors? No. Yes. I am filing under Chapter 7. Do you estimate that I million \$50,000.01-\$100 million \$ |

| | Case 16-04212 | Doc 1 | Filed 02/11/16 | Entered 02/11/16 11:23:07 | Desc Main |
|---|---------------------------------|----------------|---------------------------|---|--|
| Fill in this inforr | mation to identify your case: | | _ | | |
| Debtor 1 | Shanita First Name | Middle | Floyd Name Last N | lame | |
| Debtor 2 (Spouse, if filing | | Middle | | | |
| United States E | | Vorthern | District of III | | |
| Official I | Form 106Dec | | 1940-y | | Check if this is an amended filing |
| Declarat | tion About an I | Individu | ual Debtor's | Schedules | 12/15 |
| property by frai 1519, and 3571. Part 1: Sign | ud in connection with a ban | kruptcy case | can result in fines up to | hedules. Making a false statement, conceali \$250,000, or imprisonment for up to 20 year | ng property, or obtaining money or s, or both. 18 U.S.C. §§ 152, 1341, |
| Did you pa | ay or agree to pay someone | who is NOT | an attorney to help you t | ill out bankruptcy forms? | |
| Yes. 1 | Name of person | | | n Bankruptcy Petition Preparer's Notice, Declara ture (Official Form 119). | tion, and |
| Under per | nalty of perjury, I declare tha | at I have read | the summary and sched | luke filed with this declaration and | f ** |
| | are true and correct. | A | | uies meu with this declaration and | ALONE . |
| | are true and correct. | ad | | Signature of Debtor 2 | |

MM/DD/YYYY

Date

Date <u>2/11/2016</u> <u>MM/DD/YYYY</u>

| Debtor 1 | Case 16-042 | 12 Doc 1 | Filed 02/11/16 | Entered 02/11/16 11:23:07 Page 65 of 67 | Desc Main |
|----------------|---|--|--|---|---|
| | | for bankruptcy, die | d you give a financial st | atement to anyone about your business? I | nclude all financial institutions, |
| ∠ | No Yes. Fill in the details below. | | | | |
| | | | Date issued | | |
| | Name | | MM/DD/YYYY | | |
| | Number Street | | | | |
| | City State | Zip Cod | e | | |
| Part 12: | Sign Below | | | | |
| and de bank | correct. I understand that m ruptcy case can result in fin // // // // // // // // // // // // // | aking a false state les up to \$250,000, loyd August btor 1 | ement, concealing proper or imprisonment for up | achments, and I declare under penalty of perty, or obtaining money or property by frau to 20 years, or both. 18 U.S.C. §§ 152, 1341, Signature of Debtor 2 Date | nd in connection with a 1519, and 3571. |
| Did y | ou attach additional pages | to Your Statement | of Financial Affairs for | Individuals Filing for Bankruptcy (Official | Form 107)? |
| V | No | | | | |
| | ⁄es | | | | |
| Did y | ou pay or agree to pay som | eone who is not a | n attorney to help you fi | Il out bankruptcy forms? | |
| $ \mathbf{V} $ | No | | | | |
| | Yes. Name of person | | | Attach the Bankruptcy Petition Declaration, and Signature (C | - |
| | | | | * *** | |

Case 16-04212 Doc 1 Filed 02/11/16 Entered 02/11/16 11:23:07 Desc Main

UNITED STATES BANKED FC OURT Northern District of Illinois

| In re: | Floyd, Shanita | Case No |
|--------|--|---|
| | | Chapter. Chapter13 |
| | VERIFICA | ON OF CREDITOR MATRIX |
| | The above named Debtors hereby verify that | e attached list of creditors is true and correct to the best of their knowledge |
| | 044,0040 | In Florid Shopita |
| Date: | 2/11/2016 | /s/ Floyd, Shanita Floyd, Shanita |
| | | Signature of Debtor |

| Debi | | Case 16-04212 Doc 1 Filed 02/11/16 Entered 02/11/16 11:23:07 Desc Mail Shanita First Name Middle Name Documer Name Page 67 of 67 | 1 |
|------|-------|---|--|
| 16. | Calc | culate the median family income that applies to you. Follow these steps: | A STATE OF THE STA |
| | 16a. | Fill in the state in which you live. | |
| | 16b. | Fill in the number of people in your household. 1 | |
| | 16c. | Fill in the median family income for your state and size of household To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. | \$49,682.00 |
| 17. | How | do the lines compare? | |
| | 17a. | Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | |
| | 17b. | 17b. q Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under 11 U.S.C.</i> § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. | |
| art | 3: (| Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4) | |
| 18. | | y your total average monthly income from line 11. | \$3,302.50 |
| 19. | Com | uct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the mitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. | -\$0.00 |
| | 19a. | If the marital adjustment does not apply, fill in 0 on line 19a. | - \$0.00 |
| | 19b. | Subtract line 19a from line 18. | \$3,302.50 |
| 20. | Calc | culate your current monthly income for the year. Follow these steps: | ** *** ** |
| | 20a. | Copy line 19b. | \$3,302.50 |
| | | Multiply by 12 (the number of months in a year). | x 12 |
| | 20b. | The result is your current monthly income for the year for this part of the form. | \$39,630.00 |
| | 20c. | Copy the median family income for your state and size of household from line 16c. | \$49,682.00 |
| 21. | | do the lines compare? | |
| | | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. | |
| | | Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The</i> commitment period is 5 years. Go to Part 4. | |
| art | 4: \$ | Sign Below | |
| | | By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. | |
| | | * /s/ Shanita Floyd Manuar lays * | |
| | | Signature of Debtor 2 | |
| | | Date <u>2/11/2016</u> Date <u>MM/DD/YYYY</u> | |
| | | If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above. | |
| | | | e in in management and a second and place by the matter than to the second and a |